

**FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-872)

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9	1					
10		1				
11		1				
12		1				
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39	1					
40		1				
41		1				
42		1				
43		1				
44	1					
45		1				
46	1					
47		1				
48	1					
49		1				
50	1					
TOTAL IND.	12					
TOTAL DEP.	39					
TOTAL CLAIMS	51					

	IND.		DEP.		IND.		DEP.	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
51	1							
52								
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100								
TOTAL IND.								
TOTAL DEP.								
TOTAL CLAIMS								